

INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR PARTICIPATION

SECTION A - ATHLETE HEALTH INFORMATION/PARENT GUARDIAN AUTHORIZATION AND MEDICAL RELEASE

All athlete information, emergency information, health and accident insurance information, health information, medications and allergies sections must be completed by a parent, guardian, or adult athlete. THE PERSON PROVIDING THIS INFORMATION MUST SIGN AND DATE THE FORM IN THE SPACE PROVIDED. (IF SIGNED BY ATHLETE MUST HAVE WITNESS SIGNATURE).

SECTION B - MEDICAL CERTIFICATION

The bottom section of the form labeled "Medical Certification" must be completed SIGNED and DATED by a licensed Physician, Physician Assistant or Chiropractor. A PHYSICAL EXAMINATION BY A LICENSED EXAMINER IS REQUIRED FOR INITIAL PARTICIPATION IN SPECIAL OLYMPICS.

All signatures, dates, addresses, phone numbers, birthdate, health information and social security number MUST BE PROVIDED in order for the State office to accept and process the Application. Please make every effort to complete the information on "Anticipated Graduation Year" and "Athlete Employment Status" as the information will be used to track graduating athletes and adult participation in the program. The State office should get the ORIGINAL WHITE COPY and the Local Coordinator should keep the YELLOW COPY.

A vs. AB APPLICATION FOR PARTICIPATION

In transitioning to the new Application For Participation in Special Olympics Form the following guidelines will be used to determine "A" vs. "AB" Applications:

1. An Application will be considered an "A" Application if it is on the CURRENT FORM - REVISED and questions 1-5 of Section A are answered NO. When this application is up for renewal (every 3 years) only Section A - Athlete Health Information will need to be completed. No examiner's signature will be required under Section B - Medical Certification.
2. An Application will be considered an "A" Application if it is on the old form (letter style) and questions 1-6 are of Section A are answered NO and questions 7-12 are not a new problem. When this form is up for renewal it must be submitted on the new form. If questions 1-5 of Section A on the new form are answered NO this will be considered an "A" Application and will not require an examiner's signature.
3. An Application is considered an "AB" Application if it is on the old form (letter style) and any one of questions 1-6 are answered YES or questions 7-12 are new problems. When this Application is up for renewal it must be submitted on the new form. If any questions 1-5 of Section A of the new form are answered YES, this will be considered an "AB" Application and will require an examiner's signature. If questions 1-5 of Section A are answered NO on the Application then it will require an examiner's signature to have medical clearance of existing condition.

An athlete can have an "A" Application one time and the next time the Application could be an "AB" Application or vice versa. REMEMBER: If an application changes from A to AB or vice versa it will require a physical examination by a licensed examiner and the examiner's signature under Section B - Medical Certification.

A parent/guardian or an adult athlete must sign Section A of the Application for Participation. If Section A of the Application is signed by an adult athlete then a family member, friend or coach must also sign Section A of the Application.



Special Olympics
Georgia